



Services and support
A comprehensive resource guide



A pressing concern
The mental health of young adults

MEDIA PLANET

May 2013

MENTAL HEALTH

3
FACTS
THAT YOU SHOULD KNOW ABOUT YOUR MENTAL HEALTH



MICHAEL LANDSBERG: Living with depression for 15 years now, Landsberg says that if you don't talk about it, you'll never get better. LARGE PHOTO: RICHARD PHIBBS, SMALL PHOTO: TSN

BREAKING DOWN BARRIERS WITH ADVOCACY AND EDUCATION

A-list actress, **Glenn Close** speaks about her family's struggle with mental illness and how it inspired her to **give a voice to mental health advocacy.**

Psychological Health and Safety in your workplace doesn't have to be a tough climb.

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CHALLENGES

FACT

1

"STIGMA" IN GREEK REFERS TO A PERSON OF LESS VALUE; A "BLEMISHED PERSON"



With **1 in 5 Canadians** facing mental health issues, it is surprising that access — to good information, care, and support — continues to remain **a major challenge for Canada's healthcare system.**

There is no health without mental health

Imagine your colleagues around the water-cooler. One woman discusses her struggle with depression and anxiety. Another weighs in on her bi-polar disorder. A third shares his family history of schizophrenia.

It's likely not a conversation that would ever happen in your workplace. But it should. With statistics showing that over 3 million Canadians are affected by mental health issues, we've been silent too long. Mental disability is one of Canada's most common illnesses, and is regrettably, also the least understood. Awareness and the right information are critical to understanding the disease and opening up to talk about it will help defeat the stigma.

"If you have knowledge about mental health issues, you can become more compassionate and understanding," says Peter Coleridge, the CEO of the Canadian Mental Health Association.

Creating care

Nationally \$14 billion is spent per year on mental health — which sounds like a good amount, until you realize that it's only 7 percent of total government health spending, according to a 2010 report called the Cost of Mental Health Services in Canada, by the Institute of Health Economics.

"There continues to be significant discrimination and stigma around mental health problems in Canada that is pervasive at the systemic level in terms of funding for services," says Coleridge.

Mental health is unfortunately not regarded as having the same import-

ance as physical health. Thus even if we had the funding to build the ideal mental health system, many people are afraid to access it due to discrimination and stigma.

It's just another disease

Think of the kindness we extend to friends facing cancer, because that is a disease we understand, says Coleridge. Mental illness is just another disease and society needs to provide the resources that help people understand it.

"Once people had a misunderstanding of race and ethnicity and over time we educated, we dealt with

the fear and misunderstanding and shaped different attitudes. And we made policies that don't allow people to discriminate and stigmatize based on race or ethnicity," says Coleridge.

"For mental health we don't have those kinds of policies, and we need them."

Mind-body balance

"When you look at physical health, it's on your radar to do what you can to eat better, to go for a walk, etc." says Coleridge. So why don't we view our mental health the same way?

Research has proven the mind-body connection countless times. "People



Peter Coleridge
CEO,
Canadian Mental
Health Association

with mental health problems are more prone to developing cancers, diabetes and heart disease and so the two are very interconnected but still in our minds we separate them," says Coleridge.

Mental health issues are most likely to take hold when the balance is off. You need to do what you need to do to keep your balance — whether it's spending time with loved ones, reading a book or exercising.

End the shame

"We've have more hope now for people with mental illness than we've ever had, but society needs to do more," says Coleridge.

Society needs to invest in the resources so that people understand mental health issues, we need the care to help people make their way, and we need the knowledge and the compassion to put an end to the silence and the shame on this issue that touches the lives of so many people we love.

Together, the government, mental health consumers, educators, the media, stakeholders and other service providers need to work together to promote and advocate the mental health of Canada.

KIMBERLEY FEHR

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EVERYDAY TIPS FOR KEEPING MENTALLY HEALTHY

Here are a few healthy practices that can be easily integrated into your daily life.

The idea is that a lot of small, concerted actions can add up to a significant overall effect. Apply some of these ideas on a regular basis and you'll find yourself feeling rejuvenated and more confident:

1 Be in the present: When you're out for a walk or socializing, turn off the cell phone and take in all the sights and sounds around you.

2 'Collect' positive emotional moments: Make a point of thinking about the times when you've felt pleasure, comfort, tenderness, confidence or other positive emotions.

3 Enjoy hobbies: A hobby helps bring balance to your life. You're doing something because you want to, not because you have to.

4 Treat yourself well: It could be a good meal, a bubble bath, a movie, or just sitting in the park enjoying nature. Small daily treats have a cumulative effect.

5 Live a healthier, more active life: Eat healthy foods, be active and get enough sleep. Regular physical activity is good for the mind. It can even reduce depression and anxiety. Share your activity with others; social connections are beneficial too.

SOURCE: CMHA

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It's time we allocate more towards mental health

Mental health is a part of everyone's life. Staying mentally healthy is as important as staying physically healthy. All of us at times feel sad or anxious, grieve the loss of a loved one or lose sleep when stressed.

Research tells us that as many as 1 in 5 Canadians or 20 percent of us could benefit from mental health services each year. The cost of mental illness and addictions to the Canadian economy is billions of dollars annually.

Can you get help when you need it? Sadly, the answer all too often is no. Research shows that only about one-third of adult Canadians and 20 percent of children and teens receive the services they need. These statistics wouldn't be acceptable for cancer or for physical illness.

Why are the services not avail-

able? There are a number of reasons including, for example, the stigma Canadians feel about mental health and getting help, low funding levels for publicly funded services, more government investment in physical health than mental health and addictions, and the privatization of many services including those of psychologists.

More funding

To help solve this problem, the Mental Health Commission of Canada has called for an increase in government funding for mental health and addictions. Currently the Commission estimates that provincial governments spend, on average, about 7.5 percent of their total health budgets on mental health and addictions. The rest is spent on physical health services. The Commission urges all governments to move to a minimum of 9 percent

of the total health budget for mental health and addictions over the next 10 years. The Commission is also calling for social services to spend a minimum of 2 percent of their budgets for mental health and addictions services such as supportive housing.

Accessibility to services

Canadians often don't realize that many hospitals, community health centres and primary care practices do not include psychological services. Schools often provide services, but the wait time can be as long as 2 years. As a result, many psychological services are provided in the private sector, and are not covered by provincial and territorial health plans. This means that people who can afford it receive world class services.

It also means that many low and middle income Canadians often can't access psychological services. This

is a real problem since psychologists are the largest profession of regulated mental health specialists in Canada.

Governments are doing more in the mental health field and are to be supported in their efforts. However, the situation is dire and more needs to be done quickly. The report Public Services for Ontarians: a Path to Sustainability and Excellence (2012) by Mr Donald Drummond, an economist commissioned by the Ontario Government, strongly recommended more investment in mental health services during these times of economic difficulty because of historic underfunding. He clearly stated that a larger share of the overall health budget should be allocated to mental health and addictions which supports the recommendation of the Mental Health Commission.

These actions are necessary for a number of reasons including the

money saved on the costs that occur across a lifetime for untreated mental health problems and disorders and the improvement of the economy. He also noted, on more than one occasion, the need for more psychological and counselling services.

Our current system is very poor in terms of the resources it has available to those in need of mental health care. It's time that policy makers, government, business owners, and health-care professionals come together to ensure that quality mental health care and access to the proper support and services are available and to all Canadians.

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WE RECOMMEND



The SLAM Plan
Michael Landsberg speaks about his battle with depression.

PAGE 7

"I think that people gravitate towards me (a) out of desperation (b) because I...am not ashamed of this illness."

A psychologically healthy workplace p. 4
What can organizations do?

Overcoming the challenges of Schizophrenia p. 7
Schizophrenia is a complex mental condition that affects 1 percent of the population.

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INSIGHT

FINDING THE BEST MENTAL HELP

Gwen was 7 years old when she was diagnosed with bipolar disorder and by that time her parents had been trying to navigate through "the system" for 4 years.

Following diagnosis, Gwen and her family experienced many tough years that included several meetings

and appointments, expulsions from after school programs and summer camps and endless suspensions from school.

Understandably, all of this also led to stress at work, missed family gatherings, activities the entire family had to give up and periods of time where Gwen's parents left the house only for work and medical appointments.

Where do I begin?

Sadly, Gwen's story isn't uncommon. According to the Mental Health Commission of Canada, 1 in 5 Canadians are affected by mental illness or addiction every year.

Finding out how to access help for these concerns can be daunting; especially when you or a loved one is experiencing symptoms of mental

illness. Getting clear direction on where to start is an integral part of the journey.

Get help quickly

The Mental Health Helpline is one of three, 24/7 helplines operated by ConnexOntario. All calls or web chats are answered live by professionally trained staff.

These specialists have expert knowledge about the mental health system and access to a comprehensive database that includes programs and services that can best support people with mental illness and their families throughout Ontario. They can help you know where to get started and what to expect.

SOURCE: CONNEXONTARIO
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You Are Here
Let us help you navigate the journey

My husband is behaving strangely, how can I get him help?

I am exhausted, is there anyone who can help us family members?

I just got antidepressants, but I think I need to talk to someone

My mother is acting manic again and won't go to the doctor, what can I do?

Everything is overwhelming, I can't cope... who can help me?

Am I depressed? How do I find out?

All I do is cry, who can help me?

I've just moved, where can I find services in my new town?

My brother is hallucinating and he's not using drugs... what do I do?

1.866.531.2600
Mental Health Helpline
Supporting you in finding the right help

New research proves Kids Help Phone is significantly improving youth mental health, one kid at a time

Kids Help Phone has known from anecdotal feedback that its anonymous and confidential service was valued and appreciated by its young clients. What Kids Help Phone didn't know was how dramatic an impact its bilingual, single-session counselling was having on the well-being of the kids, teens and young adults who reach out to its professional counsellors more than 5,000 times per week.

Kids Help Phone's effectiveness was revealed following two rigorous and systematic evaluation studies conducted in 2012 which were funded by individual, foundation and corporate donors. The results show that positive changes occurred for most clients between the outset and the end of a counselling session. Substantial reductions in distress, increased clarity about how to respond to or deal with problems and increased

confidence in being able to overcome challenges are some of the changes experienced by the youth who used the service.

"We are extremely encouraged by the results of this research which demonstrated the effectiveness of our service and confirmed that we are serving youth from every geographic, cultural and ethnic background in Canada," said Sharon Wood, President and CEO of Kids Help Phone.

An Essential Mental Health Service

The research verified that Kids Help Phone is a trusted resource for the 6.5 million¹ young people aged five to 20 in Canada who may need non-judgemental support as a result of issues related to their mental or emotional health, family and peer relationship concerns, abuse, bullying, self-injury or thoughts of suicide. Kids Help Phone also fills a gap by providing support for those who are experiencing an acute mental health crisis but are in-between one-on-one counselling or therapy appointments or on a wait list to see a local professional.

New Technology Helping Youth in Distress

Live Chat, an instant messaging counselling service, was introduced by Kids Help Phone on a limited, pilot basis in 2012. The evaluation of the pilot has proved that the service is both highly popular and an effective approach to access counselling in a way preferred by those clients who found it difficult to talk about their problems, had limited privacy or for those with the most serious mental health concerns. Until such time as sufficient funding from individual and corporate donors is in place to increase the availability of the Live Chat service, it will continue to be offered for a limited number of hours four evenings per week.

For more information on Kid Help Phone's evaluation findings, please visit www.kidshelpphone.ca/proofpositive



KidsHelpPhone.ca
1 800 668 6868
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Kids Help Phone
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¹ Source: Statistics Canada, 2011 Census of Population

This was made possible by a group of passionate Kids Help Phone donors.

INSPIRATION

Glenn Close gives a voice
to mental health advocacy

FACT

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70% OF CANADIAN
EMPLOYEES
REPORT A DEGREE
OF CONCERN WITH
PSYCHOLOGICAL
HEALTH AND
SAFETY IN THEIR
WORKPLACE

Glenn Close isn't the typical A-list Hollywood actor. She's not satisfied with reflecting on a career littered with cinematic success and award after award. Close is determined to make a change; determined to improve the quality of life for people suffering with mental health issues.

Family ties

In 2009, inspired by the struggles of her sister, Jessie, and her nephew, Calen, both of whom suffer with mental illnesses, Close co-founded Bring Change 2 Mind (BC2M). BC2M is an organization that aims to eradicate the stigma and discrimination that surrounds mental illness by changing attitudes and perceptions.

"It was when Jessie came to me and said, 'I need help, I can't stop thinking about killing myself,' that I really started listening to the things that had been going on with her," said Close. "Through the process of helping her, I decided that I should use my celebrity to make people focus on this most important subject."

Putting thoughts into action

Setting up BC2M has been a voyage of discovery for Close. She has found out that depression, alcoholism and suicide are running themes in her family history, but was astounded to discover that, as in many families and areas of society, stigma and fear of discrimination led to these issues going unspoken.

"Stigma is insidious; it's toxic," said Close. "It's been around forever

and it's probably the last bastion of change. The general population realizes that there are medications, there are therapies, and that people can be in recovery and live productive lives, but even that knowledge has yet to significantly shift people's attitudes and prejudices about mental illness."

The organization has partnered with some of the most distinguished scientists and researchers from across the world to produce Public

»

"Stigma is insidious; it's toxic... it's been around forever and it's probably the last bastion of change."



GLENN CLOSE AND HER FAMILY

Together, they share their family's struggles with mental illness, in hopes of ending the stigma. PHOTO: DAN HALLMAN

Service Announcements (PSA) that contain memorable, thought provoking content. BC2M's first campaign — a PSA directed by Ron Howard — has clocked up a staggering 800 million views, so far.

"We have a lot to learn, but we have a lot of people who have been there; in the trenches," said Close. "For our next shoot, we've got permission from Time To Change (an English initiative) to use one of their PSAs because it tested so well in England in actually changing people's attitudes, or at least beginning that process."

Power of status

Close's A-list status has definitely helped boost the profile of the burgeoning organization, but it's not the only reason behind its success. "The thing that's worked in our favour is that we've stayed very authentic," she said. "Mental illness is something that my family lives with every day, and I think that resonates with people. It's not just about celebrity, it's about a very real family issue, and we want to keep it that way because so many people are dealing with exactly the same thing."

Speaking openly about mental ill-

ness normalizes the issue, problems begin to be perceived just like any physical problem and stigma fades, leaving the sufferer free from the fear of discrimination. "Most of the time stigma is based around ignorance and fear," said Close. "Our main mission is to get people to talk about it, talk about it, talk about it. It's part of the human condition: it should be embraced, talked about and no one should ever feel ashamed."

JOE ROSENGARTEN
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**"DEPRESSED. PLAGUED BY SELF-DOUBT.
DON'T SLEEP.
CAN'T CONCENTRATE.
UNABLE TO WORK.
FEEL MORE DEPRESSED.
GET UP AND DO IT
ALL OVER AGAIN."**

NOT
myself
TODAY

WHEN 500,000 CANADIANS MISS WORK EVERYDAY
BECAUSE OF MENTAL HEALTH ISSUES,
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INSIGHT



KEY JOB STRESSORS INCLUDE PRESSURED WORKLOADS
10 – 15 percent of mental health-related costs borne by employers are avoidable.



LOOKING DEEPER

Advancements in depression research

With mental illness affecting one in five Canadians and cases of depression on the rise, the need for innovative mental health research has never been greater. Dr. Georg Northoff and Dr. Pierre Blier of the Depression Research Centre at The Royal are combining their efforts in a unique collaboration that integrates brain imaging and pharmacology to better treat patients with depression.

Dr. Georg Northoff specializes in brain mapping, neurochemistry and intrinsic functions of the brain. Dr. Northoff explains how imaging technology provides the opportunity “to peer into the thinking and behaving brain, to identify not only where in the brain the malfunctions are, but also what the chemical underpinnings of such malfunction are.”

Non-traditional approach

Dr. Northoff emphasizes how scans can be utilized to measure the effectiveness of pharmacological treatment. “If we were to give a depressed person one anti-depressant, measure neuronal activity and see that the drug is not working, we would then immediately switch the treatment rather than wait for weeks to decide,” said Dr. Northoff.

Dr. Blier has been using ketamine on a trial basis in patients suffering from severe depression who have not responded to traditional anti-depressants. His focus on ketamine as a treatment for depression has been proven effective in removing suicidal ideation at a rapid pace.

“In many of these patients, who haven’t responded well to other treatments, we have used ketamine to great effect,” said Dr. Blier, explaining that depressive symptoms began to improve in as little as 40 minutes. “For people where nothing else has worked and they are almost in a crisis situation, ketamine is proving to be a life saver. It provides them temporary relief and bides us time to try other strategies.” This dynamic approach towards research has begun to revolutionize the treatment of depression.

ADAM LANDRY,

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A HEALTHY BUSINESS MAKES WAY FOR A SUCCESSFUL BUSINESS



Donna Hardaker
Workplace Mental Health Consultant

In a recent conversation at a large accounting firm, I heard the words: “We think for a living.”

Employers are increasingly aware that in this information age, the minds of employees are the muscles that propel the engines of business. So what does it mean for organizations to protect this crucial asset — the employee mind? It begins by reframing outdated ideas of how

people work, unpacking the issues to uncover systemic problems, and addressing current issues effectively — all through the lens of psychological health and safety.

It may sound like a tall order, but as organizations adapted to increased demands regarding the physical health and safety of employees in the early part of the 20th century, organizations should now be able to respond to the emerging employment issue of the 21st century: protecting and building employee mental health.

Putting employees first

Proactively addressing the psychological health and safety of employees is not only an issue of good asset management, it also protects the organiza-

tion from legal vulnerability.

Organizations can move beyond a reactive response that drains resources and creates negative narratives about the workplace. Instead, organizations build capacity for comprehensive care of their greatest asset by strategically placing the protection of that asset at the forefront of their planning.

What can organizations do?

- **Read the Standard.** Regard it as a strongbox that contains a blueprint for protecting your greatest asset.
- **Take a strategic approach.** Incorporate all aspects of employee mental safety and mental health into fiscal budgets and planning.
- **Commit to change where needed.** This can include auditing

of policies, processes, and practices to consider how they impact the mental health of all employees, and employees who have mental health conditions.

Resources you can turn to:

- The National Standard of Canada for Psychological Health and Safety in the Workplace
- Psychological Health and Safety: An Action Guide for Employers www.mentalhealthcommission.ca
- Mental Health Works www.mentalhealthworks.ca
- Workplace Strategies for Mental Health www.workplacestrategiesformental-health.com

DONNA HARDAKER

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Psychologically healthy workplaces are essential

MAKING CHANGES

The importance of prioritizing mentally healthy workplaces is becoming ever more apparent in the face of the staggering numbers related to mental health issues on the job.

Cost to Canada's economy

One 2011 study indicates that one in three workplace disability claims are related to mental illness, says Jeff Moat, president of the national charitable organization Partners for Mental Health. Another report from the Mental Health Commission of Canada shows

that mental health problems and illnesses account for more than \$6 billion in lost productivity costs.

“Most people have probably heard the statistic that one in five Canadians experiences mental health problems or illnesses. Mental health is an issue that affects all of us, especially in the workplace, where many of us spend so many hours each day,” says Mr. Moat.

Donna Hardaker, workplace mental health specialist and consultant to the Canadian Mental Health Association's Mental Health Works initiative, says the issue is beginning to gain prominence in organizations across Canada.

“Increasingly, we see that employers are recognizing the importance of their role in employee mental health, and are seeking ways of raising awareness and being more effective in addressing issues early,” says Ms. Hardaker.

Taking charge

A proactive approach to workplace mental health is needed to help improve employee well-being and productivity and lower disability claims over the long term, notes Mr. Moat. In fact, it is estimated that 10 to 25 per cent of mental health-related costs borne by employers are avoidable, according

to the Canadian Standards Association Group.

With that in mind, Partners in Mental Health is launching its Not Myself Today campaign in workplaces across the country on May 9, during Mental Health Week. The campaign aims to support the creation of mentally healthy workplaces by encouraging companies to invest in workplace mental health, and by providing resources to engage employers and employees around the issue of workplace mental health.

KRYSTLE KUNG,

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1 in 5 CANADIANS ARE AFFECTED BY A MENTAL HEALTH ILLNESS OR ADDICTION ISSUE EVERY YEAR*

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NEWS

FACT
3
IN CANADA, ONLY 1 OUT OF 5 CHILDREN WHO NEED MENTAL HEALTH SERVICES RECEIVE THEM

Recognition, prevention, and early intervention in youth is critical



Judith Nyman
Coordinator of the Coalition for Children and Youth Mental Health, Director of Program Policy for the Ontario Public School Boards' Association

Mental well-being is a human right. In an inclusive and equitable society, compassion is not enough, we need empowerment. Tolerance must give way to acceptance.

Indifference must disappear in the face of our need to make a significant difference for every person living with mental illness. When that person is a child, the moral imperative is magnified.

In Ontario, the 10-year Comprehensive Strategy on Mental Health and Addictions put children and

youth first. Front-line workers, mental health service providers, policy-makers, educators, parents, and youth themselves are engaged in a powerful collaboration. They are raising the bar

out our communities. Children and youth need to understand what mental well-being looks like and be empowered to build resilience in themselves and empathy for their



“Breaking down stigma will require mental health awareness throughout our school curriculum and throughout our communities.”

for mental health awareness, creating a common language, defining the resources and supports young people need, and are identifying the significant gaps that still have to be filled.

Taking action

Breaking down stigma will require mental health awareness throughout our school curriculum and through-

out our communities. Children and youth need to understand what mental well-being looks like and be empowered to build resilience in themselves and empathy for their

friends. They have a right to know that the adults around them are attuned to them and ready to help if needed. Beyond awareness, those who work most closely with children and youth need to be supported in developing mental health knowledge and expertise. This is at the heart of recognition, prevention and early intervention which are essential elements in

GETTING HELP

Signs and symptoms of possible youth mental health problems:

- Abuse of drugs and/or alcohol.
- Changes in school performance, falling grades.
- Inability to cope with daily problems and activities.
- Changes in sleeping and/or eating habits.
- Missing a lot of school, stealing, damaging property or problems with the law.
- Low self-esteem and negative body image.
- Prolonged feelings of unhappiness and thoughts of self-harm or death.
- Uncontrollable outbursts of anger.

SOURCE: CMHA

editorial@mediaplanet.com

keeping mental health issues from developing into more serious and incapacitating conditions.

The resources and services to help children, youth and their families have to be where they need them, when they need them and in the language they need them. Hurdles to access have to be removed. The government has to give way to placing the child at the centre. All those involved in the network of care have to work together, putting the needs of youth and families above institutional norms. They have to share resources and practices that have been tested and shown to work.

The Coalition for Children and Youth Mental Health leads the way with a vision that is focussed on transformation and sustainability. That is what children, youth and families deserve. **JUDITH NYMAN**

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Mental health of young adults is a pressing concern

A quarter of young adults have experienced an anxiety disorder and more than 1 in 10 have had an episode of depression.

Young adults (aged 18 to 25) experience many life changes as they complete their education, establish careers, form life-long relationships, and experience new financial responsibilities. Given these challenges, it is not surprising that mental health problems are most prevalent in young adults.

In fact, young adults experience higher rates of depression and anxiety in comparison to any other age group. Fewer than half of those with anxiety and depression seek professional help. Young people report that they do not seek professional help because of stigma and embarrassment, the preference to manage problems themselves, the perception that mental health services are not 'youth friendly', limited availability, and financial barriers.

For some, turning 18 can mean the end of the line for essential mental health services. Young adults are then faced with the challenge of transitioning to adult mental health ser-



Dr. John R. Walker, Ph.D., C.Psych
Mobilizing Minds Research Group

vices which often don't meet their particular needs. The development of services focused on the needs of young adults is crucial to address this gap in service.

Young adults with lived experience need to be included in the planning and development of these services to help ensure they truly meet the needs of young adults. Moreover, young adults' preference for self-reliance and informal sources of help (i.e., friends) highlight the importance of self-help resources and peer support programs based on the best available research.

Implementing new strategies

Colleges and universities throughout Canada report that many students are experiencing mental health problems and more students are coming forward to seek help. Students who experience higher levels of emotional distress are at greater risk of reduced



EXPLORING THE YOUNG MIND Young adults experience higher rates of depression and anxiety compared to any other age group.

academic performance or dropping out before graduation. The student counseling services available on most campuses are challenged to keep up with the wide range of needs of their students.

The Mental Health Commission of Canada recommends in its national strategy to "increase comprehensive school health and post-secondary mental health initiatives that promote mental health for all students and include targeted prevention

efforts for those at risk". Currently, many colleges and universities across Canada are developing comprehensive mental health and wellness strategies for their campus.

These strategies focus on promoting positive mental health through multi-level interventions that pay attention to the campus environment as well as broadening the range of supports for students in need of extra help. All members of the educational community have responsibility in

promoting positive mental health through a range of initiatives including creating an environment with strong social connections and social support for students, increased mental health awareness and self-management skills, early identification of those at risk, and enhanced efforts to connect students with services. This campus-wide approach holds out the promise of reaching a significant proportion of students at a crucial time in their development.

Resources for youth by youth

As part of the effort to increase informational support for young adults, Mobilizing Minds was funded by the Canadian Institutes of Health Research and the Mental Health Commission of Canada to find ways to get more effective information to young adults about sources of help for mental health problems.

Materials that are currently available do not adequately answer young adults' questions and often are not research-based. Our team of researchers and young adults developed materials that answer these questions using the best research that is available. These materials will be freely available to young people, family, friends, health care providers, and counsellors through a specially designed website and a web tool.

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THERE IS NO SHAME IN THE MENTAL ILLNESS GAME

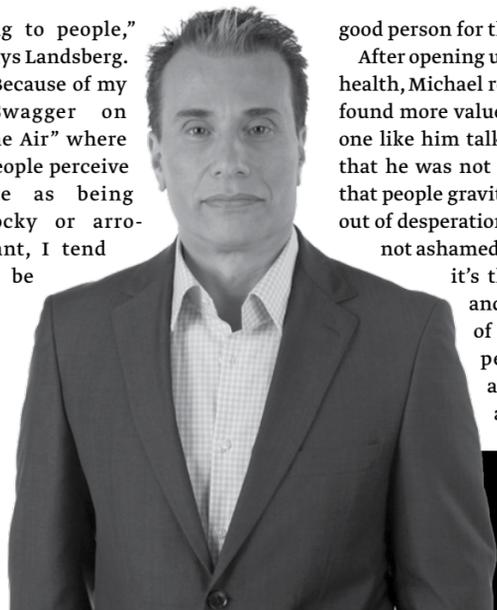
Stigma or discrimination attached to mental illnesses presents a serious barrier to diagnosis, treatment and acceptance in the community. But Michael Landsberg feels no shame in talking publicly about his battle with depression.

You might know Landsberg as the host of "Off The Record" (OTR), TSN's highly acclaimed daily sports debate show. Not only has he been hosting OTR since its debut in September 1997, but it was also around this time that he began his fight with a mental illness.

Sick — not weak

"I don't feel that I'm weak because of it and that's hugely empower-

ing to people," says Landsberg. "Because of my 'Swagger on the Air' where people perceive me as being cocky or arrogant, I tend to be a



good person for them to turn to."

After opening up about his mental health, Michael realized that people found more value in hearing someone like him talk about it in a way that he was not ashamed. "I think that people gravitate towards me (a) out of desperation (b) because I...am not ashamed of this illness. And it's that lack of shame and lack of judgment of others that makes people comfortable to talk to me about it."

MICHAEL LANDSBERG
Host of TSN's "Off The Record" speaks out for mental health awareness.
PHOTO: TSN

Talking is the first step

Michael feels that mental illness is so important to talk about because there is only anecdotal evidence and your own testimony. He advises anyone living with a mental illness to remember his SLAM plan:

■ **S is for Share.** Until you share it with one person, you will never get help.

■ **L is for Learn.** Learn everything about your illness that you can. The more you know, the more empowered you are, and the more ability you have (a) to understand this is an illness not a weakness and (b) to be a fighter for yourself.

■ **A is for Action.** It doesn't have to be a Psychiatrist. I'm not advocating medicine necessarily. But you need to make an appointment with someone. You need professional help.

■ **M is Memo.** Write down what a good day feels like because, when you have a bad day, you can easily forget all the things that are good in your life.

Recognizing depression

If you think you might be suffering from a mental illness, Michael says the key is in knowing, without a doubt, whether or not you are going to experience joy when you wake up in the morning. Another indicator would be to imagine if someone took away the biggest problem in your life and you still wouldn't feel happy, then that could be the first sign of a problem. You just have to be honest with yourself.

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! AN OPPORTUNITY TO HELP INCREASE FUNDING FOR MENTAL HEALTH IN CANADA

Dear Mediaplanet Readers,

By this time you most likely have heard the wide spread problems associated with the lack of mental health treatment services. This involves about a huge number of people suffering from, depression, anxiety, stress, family discord, emotional problems related to illnesses of all sorts, alcoholism and anger-related problems. The list goes on and on — prison inmates who are mentally ill and lack proper treatment and adolescents who turn to suicide for want of trained mental health professionals.

We could go on but you probably get the picture of how serious and how overlooked the problem of inadequate mental health services has been across Canada.

Well, what can I do about it, you may well ask? You can do a great deal. By letting your Member of the Provincial Parliament (MPP) know that you consider the scarcity of mental health services a serious matter. Simply by going to www.psych.on.ca and typing your postal code, your MPP's name will appear with a form letter which you may modify, perhaps by talking about your own mental health experiences.

With a few clicks you will be part of the change to help a troubled family, senior or teenager find the support and services they need in the community. We can do better to assist those with mental illness and addictions and you can be part of the solution. Make it happen. Press the button.

Dr Albert Silver,
Chair, Ontario Psychological Association,
Mental Health Accessibility Task Force

MOOD DISORDERS

DEPRESSION TOUCHES EVERYBODY

Mental illness impacts virtually every Canadian family and affects millions of Canadians, and strikes all socioeconomic, educational, and cultural backgrounds. Of those who develop depression and anxiety, only about 20 percent will receive adequate treatment. Astonishingly, 97 percent of people reporting depression and anxiety also report that their work, home life, and relationships have suffered as a result of their illnesses or due to illness within their family.

Depression is a common mental disorder, characterized by sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration.

Depression impacts virtually every Canadian family. 1 in 5 Canadians will experience a mental illness or problem. 4-5 percent of Canadians are depressed at any one point in time (roughly 1.5 million). There is no one specific cause of depression. It can be triggered by traumatic events, a biochemical imbalance or through experiencing a particularly negative experiences or outlook on life. A family history of the illness can also position you to being more prone to depression than others.

Depression is a treatable illness

A willingness to acknowledge, self-awareness and education, early intervention, acceptance and treatment are the primary steps in the road to recovery. They are crucial challenges we all must overcome in the recovery process. There is no better way to defeat this illness than to get the message out that having a mood disorder is something that can be addressed and is part of being a human being. We are all susceptible to mental illness as we are to physical illnesses.

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SHOWCASE

Concurrent disorders and substance abuse in youth

Concurrent disorders — when mental health and substance use problems occur together — inflict enormous costs on individuals, families and systems across Canada. Research demonstrates that more than half of those seeking help for an addiction also have a mental illness and 20 percent of those seeking help from mental health services are also living with an addiction.

Concurrent disorders are related to an increased risk of self-harm, suicide and hospitalization. However, these outcomes are not inevitable. Recent research is helping us understand the links between mental health and substance use problems and the pathways to these disorders. This understanding can enhance prevention, early identification and treatment efforts to address concurrent disorders.

Early intervention

Childhood and adolescence are key developmental periods for identifying and addressing concurrent disorders. When stress exceeds a young person's ability to cope, it can lead to mental health problems, eating disorders or substance abuse problems.

Youth early exposed to adversity and stress such as child abuse and domestic violence are more likely to develop mental health issues substance use problems or both. Early identification and intervention can reduce the likelihood that a concurrent disorder will develop. For example, children who receive prompt treatment for disorders such as ADHD are less likely to abuse substances later.

Without proper intervention, problems persist with great personal costs and significant costs to families, communities and our health and social systems.

CANADIAN CENTRE ON
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? LEARNING THE DIFFERENCE

Choosing the right mental health professional

You may not know when to see a psychiatrist or a psychologist but learning the difference between these two mental health professionals, will put you in a better position to get the help you need.

Psychiatrist vs. psychologist

Psychiatrists are physicians that specialize in assessing, diagnosing, treating and preventing mental illness. They are also licensed to write prescriptions. Psychologists do counseling and psychotherapy and provide treatment for mental disorders. However, they cannot write prescriptions.

Educational background

Psychiatrist's complete 4 years of medical school, a 1 year internship and at least 3 years of resident training. Psychologists have a master's or doctoral degree in clinical or counseling psychotherapy and then complete a 2 year internship and training in treatment methods, psychological theory, and behavioral therapy.

Therapists and therapies

There are also licensed mental health counselors, clinical social workers, psychiatric and mental health nurses who specialize in specific therapies including Psychoanalytic or psychodynamic, Behavioral, Cog-

nitive, Humanistic and Integrative or Holistic Therapy.

Who pays for services?

Psychiatrists are covered by OHIP and psychological therapy is NOT. Psychologist services may be covered by an employer or government-funded services.

Interested in a career?

A career as a psychologist could be for you if you are interested in psychotherapy and conducting research. If you like medicine, a career in psychiatry might be the route to go.

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DEPRESSION

ARE YOU A PROFESSIONAL WHO WORKS WITH YOUNG ADULTS?

Learn more about a **FREE ONLINE RESOURCE** that can help answer their questions about depression and how to get help.

Provide young adults and others with research-based info that can help them make **INFORMED CHOICES** about depression and treatment options.

www.depression.informedchoices.ca

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THE COLLEGE OF PSYCHOLOGISTS OF ONTARIO

Regulating Psychologists and Psychological Associates

NEWS

Overcoming the challenges of Schizophrenia

A solid support system and well-suited medication plan can lead to a healthier and happier life.

There's no denying that living with schizophrenia can be tough. The condition creates many internal and external challenges that can be difficult to overcome. But, with a well-suited medication plan and proper support systems in place, there's no reason why an individual with schizophrenia cannot lead a happy and fulfilling life.

John Peterson, 25, knows the ups and downs that come with living with schizophrenia: he was diagnosed with the condition when he was 18. "I was going to university and everything was going real well, except I could feel that something wasn't right," he said. "People in my family could see that I wasn't doing well, so my father and his friend came and picked me up from school. They brought me back and I was checked into the psych ward."

Positive changes

Peterson tried two different medications before discovering the one that he's currently on. The first one made him constantly hungry, while the second left him sleepy, lethargic and lacking in ambition. His current injectable medication causes him no side effects, other than some sleepiness on the day that it's administered.

"I've reached a level where I feel comfortable interacting with people. I've had a couple of jobs and I even went back to school for a bit last year,"



GETTING CREATIVE Peterson was in art school when he was first diagnosed with Schizophrenia, so being creative is something that comes naturally to him.

"When you try at something and you see the results of your actions, it's satisfying, but the main thing is interacting with people."

said Peterson. "Without a good medication it would definitely discourage me from accomplishing those things."

It's really helped me make a lot of positive changes in my life." Peterson works as a cashier for a

local corporation and he's confident that the role could develop into a long-term career. "I actually have

the potential to be promoted here shortly, so I'm excited about that," he said. "I have a test for my bilingual certification, for my second language competency, so I've been practicing for that."

Creative outlet

The regular routine that being employed brings is a huge positive for Peterson. "When I was first diagnosed, and then got back on my feet, I was shy and depressed. So, in the first job I got, at a gas station, just interacting with people and customers every day really helped me regain my previous joie de vivre," he said. "When you try at something and you see the results of your actions, it's satisfying, but the main thing is interacting with people."

When Peterson was first diagnosed with schizophrenia he was enrolled in art school, so being creative is something that comes naturally to him. He's noticed that his artistic drive has returned since changing to his current medication. "I've been able to go back and pursue that direction into art," he said. "I write a lot, I write poetry. I do enjoy creative endeavours and this medication definitely helps me in that respect."

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NEWS IN BRIEF

An indepth look at Long-Acting Injectable (LAI) antipsychotics

This month, a new set of recommendations for clinicians was introduced to encourage appropriate use of Long-Acting Injectable (LAI) antipsychotics for the treatment of Schizophrenia.

The recommendations suggest that:

- The use of an LAI should be discussed with the patient and family at all phases of illness.
- Information regarding LAIs should be discussed and reviewed with patients on a regular basis. This approach will encourage an informed patient decision.
- After a period of stability on an LAI, a patient may be in a better position to evaluate the option of oral medication.
- Clinicians should not have a negative preconception of LAIs, or assume that patients are likely to reject the method of treatment.
- LAIs should be considered and discussed in circumstances where there may be conflicting evidence or uncertainty about adherence to oral medications.
- At times, involuntary hospitalization and medication is necessary. After initiating an LAI in such circumstances, it's recommended that information regarding LAIs be discussed with the patient early in the course of long-term treatment.
- The use of LAIs should be shown to facilitate efforts at engaging the patient in other non-pharmacological treatments and rehabilitative efforts.
- It's not necessary to achieve stabilization with oral medication prior to initiating an LAI, especially if the patient is refusing to take oral medication or unlikely to take it regularly during an acute phase of psychosis.
- Regular evaluations of the effectiveness and side effects of the LAI should be conducted at a minimum of once every 3 months.
- Clinicians should be prepared to proactively address special situations that may lead to change or interruption in therapy.

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A look at the role of caregivers to patients with schizophrenia

Characterized by paranoid delusions, disorganized thought processes and a detachment from reality, schizophrenia is a complex mental condition that affects roughly one percent of the population.

The inability to think clearly and rationally sometimes affects an individual's potential to support and care for themselves, making the role of the caregiver so important for someone suffering with schizophrenia.

"The caregiver's role is absolutely crucial in terms of helping the individual, supporting them and understanding them," said Dr. Ruth Baruch, Medical Director of Community Programs, Psychiatry at Toronto East General Hospital. "Being a caregiver for someone with schizophrenia is extremely stressful. What is really quite amazing about caregivers is their positive attitude, despite the fact that they devote so much time and so many resources on an ongoing basis."

Non-adherence

The multitude of psychological effects that schizophrenia causes means that there's a high rate of non-adherence to medications. In most cases it becomes the role of the caregiver to remind and encourage the individual to take their medication, something that can cause much friction in the relationship. "Caregivers are seen as being controlling by the individual," said Dr. Baruch. "The reality is that many times the patient will say that they're taking their medication but that doesn't necessarily mean that they are, and that often leads to further conflict."

Dr Baruch feels that some of these problems result from the regularity that most medications need to be taken, which is, usually, once or twice a day. "We do have very effective, long lasting injectable medications that can be given every two or four weeks, but unfortunately they're under utilized in North America," she said. "This method causes a lot less friction and that's a huge benefit. I think the use of long acting injectable medications needs to be considered earlier in the treatment process rather than relegated as a last resort, which is how these medications have been viewed historically."



CAREGIVERS
1. Ninety-two percent of caregivers believe their sacrifices are extremely important and 77 percent feel proud about their support.
2. Schizophrenia is a complex mental condition.



Ruth Baruch, MD, FRCPC
Medical Director Community Programs,
Department of Psychiatry,
Toronto East General Hospital

"In terms of the burden on the caregiver: it's financial, emotional and social."

A recent survey discovered that, on average, a caregiver devotes twenty hours per week to the individual that they're caring for, which makes leading a personal life of their own very difficult. "It's a large proportion of their time and they do this for the long-term," said Dr. Baruch. "It has a lot of implications for their own life and their own ability to work." A comment that the survey confirmed: 30 percent of caregivers have missed more than 30 days of work.

Positive and proud
Dr. Baruch is amazed by the ability of caregivers to stay positive, even when they're faced with what seems like the harshest of adversity. "In terms of the burden on the caregiver: it's financial, emotional and social," she said. "They can often feel overwhelmed. They spend a lot of time arranging appointments and looking into all sorts of treatment strategies in a system that is not easy to navigate. But, despite



that, they are extremely optimistic in terms of their contribution to the overall care." Ninety-two percent of caregivers believe their sacrifices are extremely important and 77 percent feel proud about their support."

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